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Attorney Docket Number GRLK-003 **DECLARATION FOR UTILITY OR** Yuichi Iikubo **First Named Inventor DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) **Application Number** To be assigned Filing Date Herewith □ Declaration Declaration Group Art Unit To be assigned OR Submitted after Initial Submitted Filing (surcharge (37 CFR 1.16 (e)) required) with Initial Examiner Name Filing To be assigned

As a below named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
MATERIALS AND METHODS FOR THE PRODUCTION AND PURIFICATION									
OF CHLOROFLUOROCARBONS AND HYDROFLUOROCARBONS									
the specification of which (Title of the Invention) is attached hereto									
OR was filed on (MM/D	D/YYYY)	as United	d States Applicat	ion Number or PCT International					
Application Number	and w	as amended on (MM/DD/Y)	YYY)	(ıf applicable).					
I hereby state that I have re	viewed and understand the	contents of the above identi	ified specification	, including the claims, as					
, ,	nt specifically referred to about isclose information which is		defined in 37 CFI	R 1.56.					
Tacknowledge the duty to d	ISCOSE ITTOTTIALION WITCH 13	material to paterial inty de							
cortificate or 356(a) of any	PCT international applications also identified below, by	on which designated at lea	ast one country i	cation(s) for patent or inventor's other than the United States of or patent or inventor's certificate, writy is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO					
	l'annual an a	eu-plamantal priority data	choot PTO/SR/0	2R attached hereto:					
L hereby claim the benefit u	ation numbers are listed on a inder 35 U.S C. 119(e) of an	v United States provisional	application(s) list	ted below.					
Application Number		e (MM/DD/YYYY)							
			numbe supple	onal provisional application ers are listed on a emental priority data sheet SB/02B attached hereto.					
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[Page 1 of 2]

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Deborah I	R. Bec	k		37,3	70			Eri	с J.	Groen			32,230)
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Address	300 N	I. Meridian	Stre	et							. <u>.</u>			
Address	Suite	2700					<u>-</u>							
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Yuichi								Iikubo)					
Inventor's Signature													Date	
Residence:	City	West Lafayette State IN Country US Citizenship Japan							Japan					
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Post Office A														
City		West Lafayette	State	IN			ZIP	47906	<u> </u>		Coi	untry	US	
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 3

lame of Additional Joint Inventor, if any:										entor
Given Nan	ne (first and middle [if any])		Family Name or Surname							
Stanhan				Ower	18					
Stephen Inventor's				OWEI	110					
Inventor's Signature		T	T		- I			Dat	te	
Residence: City	White Pine	State	TN		Country	US		Citizer	nship U	rs .
Post Office Address	P.O. Box 909									
Post Office Address	327 Deer Creek Trail	_								
City	White Pine	State	TN		ZIP 3	7890	Counti	ry US		
Name of Addition	nal Joint Inventor, if any	y:			A petitio	n has been file	d for tl	his unsi	gned inv	entor
	me (first and middle [if any])					Family Nar	ne or	Surnam	ie	
Mitchel				C	ohn					T
Inventor's Signature									Date	
Residence: City	West Lafayette	State	IN		Country	US		Citiz	zenship	US
Post Office Address	3029 Courthouse, Apt.	2B								
Post Office Address							т			
City	West Lafayette	State	IN_	· <u></u>	ZIP	47906	Cou	intry	US	
Name of Addition	nal Joint Inventor, if an	y:			A petitio	on has been file	d for t	his uns	igned inv	ventor
Given Na	me (first and middle [if any])				Family Na	ne or	Surnan	ne	
Stephan M.				Bran	ndstadte	<u>r</u>				
Inventor's Signature			1	 1		1	<u></u>		Date	
Residence: City	Indianapolis	State	IN		Country	US		Citi	zenship	US
Post Office Address	3946 N. Washington B	lvd.								
Post Office Address										, ·
City	Indianapolis	State	IN		ZIP	46205		Country	us	

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 3

		_										
Name of Addition		A petition has been filed for this unsigned inventor								ntor		
Given Nan	ne (first and middle [if any])		Family Name or Surname									
Vicki E.	Vicki E Hedrick											
Inventor's												
Signature						Π			D	ate	_	
Residence: City	Brookstown	State	IN _		Country	U	JS		Citiz	enship	US	5
Post Office Address	262 S. 300 E			_								
Post Office Address					 							
City	Brookstown	State	IN_		ZIP	<u>47</u>	923	Counti	y US	S		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor										ntor		
	me (first and middle [if any])						Family Nam	ne or	Surna	me		
Janet K. Boggs												
Inventor's Signature										Date		
Residence: City	Brownsburg	State	IN _		Country	y	US	<u>.</u>	Ci	tizenshi	ip	US
Post Office Address	6925 900 E											
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City	Brownsburg	State	IN		ZIP		46112	Col	intry	US		
Name of Additio	nal Joint Inventor, if an	y:			A petit	tion	n has been filed	d for 1	this ur	nsigned	inv	entor
Given Na	me (first and middle [if any])					Family Nan	ne or	Surna	ame		
John			_	Qia	n		<u> </u>		1			
Inventor's Signature			- 							Date	_	
Residence: City	West Lafayette	State	IN		Count	γ	US	<u></u>	С	itizensh	ıip	China
Post Office Address	3384 Peppermill Drive,	Apt. 1	D									
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	West Lafayette	State	IN		ZI	P	47906		Coun	try U	S	
City	West Latayette	Jialt	14.			_,						المحموم المساوات

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ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>3</u>

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Name of Additional Joint Inventor, if any:									entor	
Given Name (first and middle [if any]) Family Name or Su								Surname		
Julie Sacarias										
Inventor's Signature								Date		
Residence: City	El Dorado	State	AR _		Country	US		Citizens	hip U	S
Post Office Address	908 W. 7th Street									
Post Office Address										
City	El Dorado	State	AR		ZIP 7	1730	Count	ry US		
Name of Additio	nal Joint Inventor, if any	/ :			A petitio	on has been file	d for t	his unsigr	ed inv	entor
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REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)

Name	Registration Number	Name	Registration Number
John F. Hoffman	26,280		
Anthony Niewyk	24,871		
Michael D. Smith	40,181		
Michael D. Schwartz	44,326		
Sarah M. Jabbari	47,679		
Kitisri Sukapinda	47,116		
Dennis S. Schell	48,696		

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